

RECEIVED
CENTRAL FAX CENTER

FEB 25 2008

FAX TRANSMISSION

DATE: 2/25/08

PTO IDENTIFIER: Application Number 10/827,131
Patent Number

Inventor: Gaudet, et al.

MESSAGE TO: US Patent and Trademark Office

FAX NUMBER: (571) 273-8300

FROM: Lisa M. Treannie, Esq. *LMT*
MORSE, BARNES-BROWN & PENDLETON, P.C.

PHONE: 781-622-5930

Attorney Dkt. #: WIBR-522-102

PAGES (Including Cover Sheet): 3

CONTENTS: Petition for Extension of Time (1 page)
Certificate of Transmission (1 page)
Charge \$1050.00 to Deposit Account No. 50-3655

If your receipt of this transmission is in error, please notify this firm immediately by collect call to sender at (781) 622-5930 and send the original transmission to us by return mail at the address below.

This transmission is intended for the sole use of the individual and entity to whom it is addressed, and may contain information that is privileged, confidential and exempt from disclosure under applicable law. You are hereby notified that any dissemination, distribution or duplication of this transmission by someone other than the intended addressee or its designated agent is strictly prohibited.

MORSE, BARNES-BROWN & PENDLETON, P.C.
Reservoir Place, 1601 Trapelo Road, Suite 205
Waltham, Massachusetts 02451
Telephone: (781) 622-5930 Facsimile: (781) 622-5933

FEB 25 2008

PTO/SB/97 (09-04)

Approved for use through 07/31/2006. OMB 0651-0031

U. S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

Application No. (if known): 10/827,131

Attorney Docket No.: WIBR-522-102

Certificate of Transmission under 37 CFR 1.8

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent and Trademark Office.

on 2/25/08
Date


Signature

PAULA DEPELTEAU

Typed or printed name of person signing Certificate

Registration Number, if applicable

781-622-5930

Telephone Number

Note: Each paper must have its own certificate of transmission, or this certificate must identify each submitted paper.

Petition for Extension of Time (1 page)

FEB 25 2008

PTO/SB/22 (10-07)

Approved for use through 10/31/2007. QMB 0651-0031

U.S. Patent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PETITION FOR EXTENSION OF TIME UNDER 37 CFR 1.136(a) FY 2006 (Fees pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818).)		Docket Number (Optional) WIBR-522-102	
Application Number 10/827,131		Filed April 19, 2004	
For GLYCEROL AS A PREDICTOR OF GLUCOSE TOLERANCE			
Art Unit 1644		Examiner Rooney, Nora M.	
This is a request under the provisions of 37 CFR 1.136(a) to extend the period for filing a reply in the above identified application.			
The requested extension and fee are as follows (check time period desired and enter the appropriate fee below):			
	Fee	Small Entity Fee	
<input type="checkbox"/> One month (37 CFR 1.17(a)(1))	\$120	\$60	\$ _____
<input type="checkbox"/> Two months (37 CFR 1.17(a)(2))	\$460	\$230	\$ _____
<input checked="" type="checkbox"/> Three months (37 CFR 1.17(a)(3))	\$1050	\$525	\$ 1,050.00
<input type="checkbox"/> Four months (37 CFR 1.17(a)(4))	\$1640	\$820	\$ _____
<input type="checkbox"/> Five months (37 CFR 1.17(a)(5))	\$2230	\$1115	\$ _____
<input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27.			
<input type="checkbox"/> A check in the amount of the fee is enclosed.			
<input type="checkbox"/> Payment by credit card. Form PTO-2038 is attached.			
<input type="checkbox"/> The Director has already been authorized to charge fees in this application to a Deposit Account.			
<input checked="" type="checkbox"/> The Director is hereby authorized to charge any fees which may be required, or credit any overpayment, to Deposit Account Number 50-3655. I have enclosed a duplicate copy of this sheet.			
WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.			
I am the <input type="checkbox"/> applicant/inventor.			
<input type="checkbox"/> assignee of record of the entire interest. See 37 CFR 3.71. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).			
<input type="checkbox"/> attorney or agent of record. Registration Number _____			
<input checked="" type="checkbox"/> attorney or agent under 37 CFR 1.34. Registration number if acting under 37 CFR 1.34 41,368			
Signature <u>Lisa M. Treannie</u>		Date <u>2/25/08</u>	
Typed or printed name <u>Lisa M. Treannie, Esq.</u>		Telephone Number <u>781-622-5930</u>	
NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.			
<input checked="" type="checkbox"/> Total of <u>1</u> forms are submitted.			

02/27/2008 PCHOMP 00000012 503655 10827131
01 FC:1253 1050.00 DA